

12-07-06

IFW\$



Application No. (if known): 10/608,723

Attorney Docket No.: 0019240.00594US1

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42,812  
Registration Number, if applicable

(212) 230-8800  
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- Transmittal form (1 page)
- Petition for Extension of Time (1 page)
- Fee Transmittal (1 page)
- Reply to Office Action of August 23, 2006 (13 pages)



PTO/SB/21 (09-06)

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# TRANSMITTAL FORM

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Total Number of Pages in This Submission

17

Application Number

10/608,723-Conf. #6915

Filing Date

June 26, 2003

First Named Inventor

Andrew R. Marks

Art Unit

1646

Examiner Name

R. Li

Attorney Docket Number

0019240.00594US1

## ENCLOSURES (Check all that apply)

☒ Fee Transmittal Form☐ Fee Attached☒ Amendment/Reply☐ After Final☐ Affidavits/declaration(s)☒ Extension of Time Request☐ Express Abandonment Request☐ Information Disclosure Statement☐ Certified Copy of Priority Document(s)☐ Reply to Missing Parts/  
Incomplete Application☐ Reply to Missing Parts under  
37 CFR 1.52 or 1.53☐ Drawing(s)☐ Licensing-related Papers☐ Petition☐ Petition to Convert to a  
Provisional Application☐ Power of Attorney, Revocation  
Change of Correspondence Address☐ Terminal Disclaimer☐ Request for Refund☐ CD, Number of CD(s) \_\_\_\_\_☐ Landscape Table on CD☐ After Allowance Communication  
to TC☐ Appeal Communication to Board of  
Appeals and Interferences☐ Appeal Communication to TC  
(Appeal Notice, Brief, Reply Brief)☐ Proprietary Information☐ Status Letter☒ Other Enclosure(s) (please  
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Remarks

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name

WILMER CUTLER PICKERING HALE AND DORR LLP

Signature

Printed name

Jane M. Love

Date

December 6, 2006

Reg. No.

42,812

Express Mail Label No. EV 901257974 US Dated: December 6, 2006



Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL**  
**For FY 2006**

☒ Applicant claims small entity status. See 37 CFR 1.27

Complete if Known	
Application Number	10/608,723-Conf. #6915
Filing Date	June 26, 2003
First Named Inventor	Andrew R. Marks
Examiner Name	R. Li
Art Unit	1646
Attorney Docket No.	0019240.00594US1

TOTAL AMOUNT OF PAYMENT	(\$)	60.00
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**METHOD OF PAYMENT** (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account    Deposit Account Number: 08-0219    Deposit Account Name: Wilmer Cutler Pickering Hale and Dorr LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below    ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17    ☒ Credit any overpayments

**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Small Entity	
	Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

**Total Claims**    **Extra Claims**    **Fee (\$)**    **Fee Paid (\$)**    **Multiple Dependent Claims**

\_\_\_\_\_ - = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_    **Fee (\$)**    **Fee Paid (\$)**

HP = highest number of total claims paid for, if greater than 20.

**Indep. Claims**    **Extra Claims**    **Fee (\$)**    **Fee Paid (\$)**

\_\_\_\_\_ - = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____	_____	_____ / 50 _____ (round up to a whole number) x _____ = _____		

**4. OTHER FEE(S)**

	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): <u>2251 Extension for response within first month</u>	60.00

**SUBMITTED BY**

Signature	<u>Jane M. Love</u>	Registration No. (Attorney/Agent)	42,812	Telephone	(212) 230-8800
Name (Print/Type)	Jane M. Love	Date	December 6, 2006		

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